

PATENT PROSECUTION RECEIPT OF FILING

Attorney/LAA: CJS:cja
 PTO Due Date: February 18, 2008
 Current Date: February 19, 2008

Atty. Docket No: 35646-175183
 Title of Application: BIDDER-SIDE AUCTION DYNAMIC PRICING AGENT, SYSTEM, METHOD AND COMPUTER PROGRAM PRODUCT
 Application No: 09/963,742
 Patent No. : _____

Filing Date: September 27, 2001
 Issue Date: _____

The following items were received from Venable LLP, Washington, D.C., by the U.S. Patent & Trademark Office on the date stamped hereon:

Transmittal Form SB-21

Fee Transmittal Form SB-17

New U.S. Patent Application
 (____ pages of specification/claims)

Rule 53(d) Continued Prosecution Application

Rule 53(b) Continuation or Divisional Application
 (attach copy of specification, claims, drawings and declaration)

U.S. National Stage Application of PCT Application

Request for Continued Examination (RCE) under 37 CFR 1.114

Yellow filing receipt

Substitute Specification

Priority Document-Cert. Copy of
 Appln. #: ____; Country: ____; Date Filed: ____

Formal Drawings (____ sheets, Figs.)

Inventor Declaration

Assignment w/Cover Sheet

Response to Notice to File Missing Parts

Response to Notice to File Missing Requirements

Response to Requirement

Information Disclosure Statement with cited references

Response

Amendment / Preliminary Amendment

Petition/Request for Extension of Time (1 mo. ext.)

Power of Attorney

Terminal Disclaimer

Notice of Appeal

Appeal Brief (in triplicate) / Reply Brief (in triplicate)

Request for Oral Hearing

Confirmation of Hearing Petition

Issue Fee Transmittal

Certificate of Correction

Maintenance Fee Transmittal

Status Inquiry

Other: (Please describe below)

U.S. PTO FEES ENCLOSED

____ Filing Fee

____ Search Fee

____ Examination Fee

____ Additional Claim Fee

60.00 Extension Fee

____ IDS Fee

____ Recordation Fee

____ Notice of Appeal Fee

____ Brief on Appeal

405.00 Request for Continued Examination

____ Petition Fee

____ Issue Fee

____ Maintenance Fee

____ Other Fees (Describe)

465.00 Total Fees Paid

Charge the above fees as follows:

USPTO Deposit Account No. 22-0261

USPTO Deposit Account No. _____

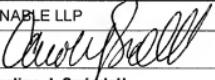
USPTO not to charge any Deposit Account

Reviewed By: C. Swindell
 Signature of Attorney

2/19/08
 Date

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM		Application Number	09/963,742-Conf. #9308
(to be used for all correspondence after initial filing)		Filing Date	September 27, 2001
		First Named Inventor	Rob R. Montgomery
		Art Unit	3691
		Examiner Name	O. Akintola
Total Number of Pages in This Submission		Attorney Docket Number	35646-175183

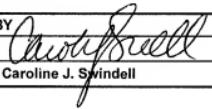
ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form SB-17 <input checked="" type="checkbox"/> Transmittal Form SB-21 <input checked="" type="checkbox"/> Yellow filing receipt <input checked="" type="checkbox"/> Extension of Time (1-mo.) <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	VENABLE LLP 		
Signature			
Printed name	Caroline J. Swindell		
Date	February 19, 2008	Reg. No.	56,784

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEES TRANSMITTAL For FY 2008		Application Number	09/963,742-Conf. #9308
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	September 27, 2001
TOTAL AMOUNT OF PAYMENT (\\$) 465.00		First Named Inventor	Rob R. Montgomery
		Examiner Name	O. Akintola
		Art Unit	3691
		Attorney Docket No.	35646-175183

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):	_____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number:	22-0261	Deposit Account Name:	Venable LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below.	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee				
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments				

FEES CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	_____
Design	210	105	100	50	130	65	_____
Plant	210	105	310	155	160	80	_____
Reissue	310	155	510	255	620	310	_____
Provisional	210	105	0	0	0	0	_____
2. EXCESS CLAIM FEES						Small Entity Fee (\$)	Fee (\$)
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
				Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	 			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
		/50 =				=	
(round up to a whole number) x							
						Fees Paid (\$)	
4. OTHER FEE(S)							
Other (e.g., late filing surcharge): 2251 Extension for response within first month						60.00	
2801 Request for continued examination (RCE) (see 37						405.00	
...							

SUBMITTED BY					
Signature				Registration No (Attorney/Agent)	56,784
Name (Print/Type)	Caroline J. Swindell			Telephone	(703) 760-1676
Date February 19, 2008					